

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>TH</i>		<i>11-29-01</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>11-29-01</i>
FORMALITY REVIEW	<i>CTH</i>	<i>244</i>	<i>11-29-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1 5 8	
2 7 15	
3 02 02	
4 2 1	
5 3 1	
6 4 0	
7 5 0	
8 6 1	
9 7 1	
10 8 0	
11 9 1	
12 10 0	
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50 48 1	

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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